FOR INSTRUCTIONS, SEE BACK OF FORM

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A

Des Moines, Iowa 50319 Fax: 515-281-4073 **DISCLOSURE SUMMARY PAGE**

CAMPAIGN DISCLOSURE BE.

Effective January 1, 2010, all statements and reports filed by new committees of the state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed as electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

COMMITTEE NAME (Must be same as on Statement of Organization) FORM DR-2 DISCLOSURE IMPORTANT: Indicate by # type of committee you are reporting for: (Rev. 12/2009) REPORT (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party 4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other Political For Office Use Only Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC 11) Local Ballot Issue Comm. # CANDIDATE COMMITTEES ONLY: Capdidate Name Political Party (if applicable) Scanned Computer District (if Senate or House) Audited aural Ward 3 NOS LYS Late reports are subject to possible vivil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a captidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. PERSON FILING REPORT REPORT FOR (1) ELECTION /(2) MON-ELECTION YEAR. Indicate by # | Z ☐CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) ("also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) SUB-TOTAL\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)...... Schedule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report balance must be zero)\$ **UNPAID BILLS (From Schedule D - Attach Schedule D)......\$ *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ CONSULTANT BREAKDOWN (Schedule G Attached?) YES **CANDIDATE COMMITTEES ONLY:** VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

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Schedule G instructions and Iowa Code 68A.402(3)(i).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE

B MONETARY
(Rev. 07/03) EXPENDITURES

CHECK THIS BOX IF
AMENDING FORM

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

Irin	LOIC TAY	NAME AND ADDRESS TO WHOM	PURPOSE	41401917
DATE EXPENDED (MM/DD/YR)	ID NUMBER (If applicable) AND PAC CHECK NUMBER	EXPENDITURE (Disbursement) WAS MADE	(DESCRIBE TRANSACTION)	AMOUNT EXPENDED
		Victory Enterorises	^	
2/30/11	CK#1027	Victory Enterprises 5200 SW 30 5 St. Ste. 7 Daverport, IA 52802	Mailer Bank fees	\$ 1100.62
	ID#		1 1 1	63.60
2011	CK#	First Bank	bank tels	63.60
	ID#			
	CK#			
	ID#			
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	ID#		- 1	
	CK#			
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e .	CK#			
			SUB-TOTAL	\$ 1164.22
			TOTAL (if last page of this schedule)	\$1164.22
THIS BOX AF	PLIES TO CANDID	ATES' COMMITTEES ONLY:		
			toried on Schedule H. (Refer to Schedule H insti	

Page]	<u>. </u>	of	L	

MITTEE NAME	(Must be same as on Statement of Organization)		SCHEDULE F (Rev. 02/08)	LOANS RECEIVE & REPAID
	e reports money loaned to the committee which is deposited in the co	mmittee account.	CHECK	THIS BOX
AL UNPAID LO	ANS FROM <u>LAST</u> REPORTING PERIOD \$	· .	AMENDI	VOI OINIVI
Ti - MONETAR (Original sc	RY LOANS RECEIVED <u>THIS</u> REPORTING PERIOD Durce of loan, such as a bank, must be shown if a third party is involve	ed. Include loans from candi	date's personal f	unds.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable	*) AMOUNT (FLOAN
2/30/11	Russ Trimble 1600 S. 43th Street West Ocs Moinls, 1A 51265	Self	1200	.00
		x .		
		-		
		TOTAL (DADY!)	. 17.00	200
(Loens fo	ARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD orgiven must be reported on Schedule E — In-kind Contributions.) NAME AND ADDRESS OF LENDER	TOTAL (PART I) RELATIONSHIP TO	\$ 1200	
	rgiven must be reported on Schedule E – In-kind Contributions.)		AMOUNT	
(Loans fo	rgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	AMOUNT	
(Loans fo	rgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	AMOUNT	
(Loans fo	rgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	AMOUNT	
(Loans fo	rgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	AMOUNT	
(Loans fo	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO	AMOUNT	
(Loans fo	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable candidate) (If Applicable ca	AMOUNT	REPAID